SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.  Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent card from being returned to you. The return receipt fee will provide you the name of the person delive. to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.  1. Show to whom delivered, date, and addressee's address.  2. Restricted Delivery (Extra charge)		
3. Article Addressed to:	<b>4. Article Number</b> P 074 978 774	
JOHN S VANDERPOOL UMETCO MINERALS P O BOX 307 LASAL UT 84530	Type of Service:  Registered Insured  Certified COD Express Mail Receipt for Merchandise	
,	Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Address X Lugh EEMs	8. Addressee's Address (ONLY if requested and fee paid)	
6. Signature — Agent X		
7. Date of Delivery - 90		
S Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT		

06 DOGM M031073

# OFFICIAL BUSINESS

#### SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



#### RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.

. .. .. .

STATE OF UTAH
NATURAL RESOURCES
OIL, GAS, & MINING
3 TRIAD CENTER, SUITE 350
SALT LAKE CITY, UTAH 84180-1203

## 074 978 774

### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)		
Sent to John S Vanderpool UMETCO MINERALS		B
Street and No. P O BOX 307		
P.O., State and ZIP Code LASAL UT 84530		DOG
Postage	S	3
Certified Fee	¥.	Z
Special Delivery Fee	-	M/037/023
Restricted Delivery Fee		7/0
Return Receipt showing to whom and Date Delivered	1	23
Return Receipt showing to whom, Date, and Address of Delivery	-	10
TOTAL Postage and Fees	S	10/16
Postmark or Date  9 - 2 7 - 9		

PS Form 3800,